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COUNTY BOROUGH OF WARRINGTON.

Annual Report
TO THE
Education Authority
ON
SCHOOL HYGIENE

For the Year
1938

STUART F. ALLISON,
M.B., Ch.B., D.P.H.

*Medical Officer of Health
and School Medical Officer.*



WARRINGTON:

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SCHOOL MEDICAL SERVICE COMMITTEE.

LIST OF MEMBERS, 1938.


Alderman FRANK STRINGER, J.P. Mrs. C. JACKSON HOLMES,
Alderman JOSEPH BANKS, Councillor WILLIAM HIGHAM.
Councillor J. CANON BARDSLEY, Mr. JOHN HELSBY, J.P.
Mr. GEORGE A. WORSLEY, Mr. HENRY GLEAVE,
Mr. F. H. LONGSHAW (Resigned 22/9/38)
Mr. CHARLES E. PARKER (Chairman)
Ex-Officio. Alderman DAVID TINNION, J.P.
(Chairman of the Education Committee). (Deceased 27/10/38).
Rev. EDWARD DOWNHAM, B.A.
(Chairman of the Education Committee).

OFFICIALS:

Office Held.	Name.	Qualifications.
School Medical Officer....	STUART F. ALLISON	M.B., Ch.B., D.P.H.
Asst. School Medical Officer	C. A. PAULUSZ	L.R.C.P., L.R.C.S. (Ed.) L.R.F.P. & S. (Glas.), L.M.R.C.P.I., D.P.H.
Temporary Asst. School Medical Officer	ELIZABETH THOMPSON	M.B., Ch.B., D.P.H. (5/1/38—14/5/38)
Dental Officers	WILLIAM C. PARR	L.D.S. (Liverpool).
	Miss I. M. CANDON	L.D.S. (Sheffield).
Temp. Dental Officer	Miss V. M. DUNN	L.D.S. (7/3/38—9/7/38)
School Nurses	Miss BROWN	General Cert., S.R.N.
	Miss GRIFFITH	General Cert.S.R.N., Hygiene Cert. (Queen's).
	Miss WRIGHT.....	General Cert. S.R.N., Fever Hospital Cert.
	*Miss COVENTRY	General Cert. S.R.N., Mid. S.G.M., S.C.M., Cert. R.S.I., R.S.I. Children's Cert.
	Miss FLETCHER	General Cert., S.R.N. S.R. Fever Nurse, C.M.B. Cert. R.M.P.A.
	*Miss SHERMAN	S.R.N., S.C.M., R.S.I. Cert. (Appointed 1/7/38)
	Miss A. OSBORNE	*Joint Appointments: Health Visitor—School Nurse Dental Attendant
Clerical Staff.		
Dental Clerk	Miss J. CARMEL.....	
Medical Inspection Clerk	Miss J. TERRY.....	
Special Officer	Mr. W. RUTTER	
Clerk	Mr. J. ACTON	
Chief Medical Inspection Clerk	Mr. J. BENION	
Assistant Secretary for Education	Mr. R. PRICE	
Chief Education Officer	C. E. STEWART, B.A.	

SCHOOL CLINICS.

Inspection Clinic (page 20)	Health Dept., Sankey Street	Examination of cases referred by Teachers, Attendance Officers, Nurses, &c.	Daily—9.30 a.m. to 12 noon (week-days) 9.30 a.m. 12 noon (Sat.)
Minor Ailment Clinic (page 19)	"	Treatment of contagious diseases of skin, eyes, &c.	9.30 a.m. to 12 noon Sats., 9 a.m. to 12 noon.
Dental Clinic (page 27)	"	Dental Treatment	9.30 a.m. to 12 noon 2 p.m. to 5 p.m. Special Cases, Wednesday and Saturday mornings
	Warrington Infirmary	Prescription of Spectacles	1 p.m. Fridays
	"	Treatment of enlarged tonsils and adenoids	Thursday 1.30 p.m. for examination. Operations on following Thursday
	8, Winmarleigh St.	Treatment of ring-worm of scalp	By appointment
	Borough General Hospital	Treatment of Crippling Defects	Daily, 9 a.m.
	"	Treatment of cases of aural discharge by ionisation	Daily, 9 a.m.



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TO THE EDUCATION AUTHORITY OF THE COUNTY BOROUGH OF WARRINGTON.

Ladies and Gentlemen,

I have the honour to present the Annual Report on the School Medical Service for the year 1938. This Report is the ordinary record of the work of the Medical and Nursing staff of the Education Authority, being constructed so as to embody certain tables of reference required by the Board of Education. Owing to the exigencies of the national situation it was not considered opportune to proceed with certain developments and expansions of the service previously contemplated.

There was a reduction of the children in the elementary school population, the number of children in attendance for the year 1938 being 11,025 (as compared with 11,258 in 1937 ; and 11,576 in 1936) ; of these 11,025 children, 3,267 underwent routine medical examination in the schools, and in addition 2,537 special examinations were conducted within the schools or in the clinic, making a total of 5,804. There was furthermore the usual medical supervision exercised over the children attending the Boteler Grammar School and the Secondary School.

In the Elementary Schools the number of individual children found at the Routine Medical Inspections with defects requiring treatment (exclusive of uncleanness and dental disease) was 229, or 7% of those examined (page 9).

Practically all the defects found during the year received satisfactory treatment.

At our School Clinic 341 children attended on 2,698 occasions for the treatment of minor ailments. In addition, the Nurses carried out 24,054 dressings in the Schools (page 18), thus obviating the necessity of excluding the children from attendance.

I have to express my appreciation of the excellent work done by the School Nurses, reference to which is made in the body of the report.

Mr. Flood, Chief Sanitary Inspector, was of great assistance to me in investigating and supervising the sanitary condition of the schools.

I wish to take this opportunity of conveying to the Head Teachers of all the schools, and their Assistants, my sincere thanks for their co-operation and the cordial manner in which they have always rendered assistance to the members of the School Medical Service.

I would also like to express my thanks to the School Medical Service Committee for their cordial support, and to Mr. C. E. Stewart, Chief Education Officer, and his staff, for their ready co-operation and assistance in collecting much of the information presented in this report.

I am,

Your obedient Servant,

STUART F. ALLISON.

1.—STAFF.

The Staff (as detailed on page 2) keeps under supervision the 11,025 children at present on the School Registers.

Cost.

Rateable value, 31/3/38 = £390,687.

Estimated product of 1d. rate, 1938-39 = £1,550.75.

Total estimated expenditure on Elementary Education, 1938-39 £148,663

Total estimated net cost of Special Services for Elementary Education, i.e., School Medical, Blind, Deaf Schools, etc., 1938-39	£6,699
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Total estimated net cost of School Medical Service only (Elementary), 1938-39	£4,367
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(in other words, out of every £ spent on Elementary Education about 7d. is for Medical Services in connection with the scholars).

Gross cost of School Medical Service, year ending 31st March, 1938 £4,660
(compared with £4,760 in 1934-35, £4,761 in 1935-36 and
£4,691 in 1936-37).

Net cost on the rates of School Medical Service, same period £2,235 approx.

Cost per head of children on School roll, 1937-38.....	{ 7s. 11d. gross.
	{ 3s. 9½d. net.

2.—CO-ORDINATION WITH OTHER HEALTH SERVICES.

There has always been close co-operation between the work of the School Medical Service and that of the Local Health Department, as described in former Reports.

By means of daily lists of cases admitted and discharged from the Corporation Hospitals the School Nurses are enabled to obtain early information of cases of illness occurring in school children and take any necessary steps to follow them up.

Co-ordination with Child Welfare Service.

The method of transference of records from the Maternity and Child Welfare Department to the Schools has been described in previous Reports.

3.—SANITARY CONDITION OF THE PUBLIC ELEMENTARY SCHOOLS.

Supervision is constantly given to the hygienic conditions, especially as regards their surroundings, ventilation, lighting, heating, equipment and sanitation, and summaries of the conditions found have been given from time to time in previous Annual Reports.

The following improvements were made at schools within the Borough during the year 1938 :—

On the 31st December, 1938, there were 22 Public Elementary Schools divided into 46 Departments and also 2 Secondary Schools. A portion of one school is utilised as a Special Class for Partially-Sighted Children.

Heating.

Central Heating is installed in 39 out of the 46 departments. In 4 departments (St. Ann's and St. Barnabas' Schools) open fires are the means of heating, while in 3 departments (Heathside Boys, Girls and Infants) coke stoves only are provided. In 2 schools coke stoves are used in addition to central heating.

It is recognised that open fires and coke stoves cannot be regarded as satisfactory means of heating, particularly in the latter case, when it is noticed that offensive fumes are passed into the atmosphere of the classroom and children in the immediate proximity are affected unfavourably.

Lighting.

As a rule this is good throughout our Schools, but on dull days is poor in some of the classrooms in the older schools. The following are the worst examples, but owing to the structural arrangement of the building or the environment are difficult to remedy.

St. Barnabas' Mixed Department. Poor in parts of main room.

St. Ann's Mixed Department. Poor in parts of main room.

Silver Street Mixed Department. Poor in central section, main room, ground floor.

Artificial light (mainly electric) is available in all class rooms.

Ventilation.

Generally speaking this is satisfactory and is highly so, as would be expected, in the newer schools. Alterations are in progress which I hope will improve the ventilation of the main room in St. James' Infants' Department.

Washing and Drinking.

The arrangements in the following schools are insufficient :—

Latchford R.C. Mixed.

St. Benedict's Mixed and Infants.

St. Mary's Boys.

Additional facilities for washing have recently been installed in all departments of St. James' Schools.

It is essential too, that children should be taught to wash their hands after using the sanitary conveniences, and for this purpose the provision of adequate and accessible wash-hand basins is necessary.

Sanitary Conveniences.

The type of sanitary convenience in use is as follows :—

Pedestal Water Closets	....	....	33
Trough Closets (Auto-flush)....	....	....	11
Pail Closets	....	....	2
			—
			46
			—

There is no doubt that the remaining pail closets should be abolished from the schools; nor indeed, can automatic flushed trough closets be regarded as satisfactory.

It is in my view now clearly established that the only suitable method of providing proper sanitary accommodation for school-children is by means of single pedestal W.C.'s; and when, as in all the schools in Warrington, adequate sewers are available and accessible this type of W.C. should be introduced in all schools at the earliest opportunity.

Cloakrooms.

In the following instances by reason of insufficient accommodation and poor lighting and ventilation, together with the absence of adequate drying facilities, the cloakrooms cannot be accepted as satisfactory :

Parochial Boys
 Latchford R.C.
 Heathside (Girls and Infants)
 St. Barnabas'
 St. Ann's Infants
 St. Mary's R.C. Boys

School Baths.

The only schools with bathing accommodation are Bolton Council, Oakwood Avenue Council and Evelyn Street Council.

Baths were introduced in the first place at Evelyn Street Council School. Unfortunately, these baths are deficient in capacity and arrangement, and should be replaced.

Comparing recent years the number of routine inspections have been :—

1938	.....	.....	.....	.....	3,267
1937	.....	.....	.....	.....	3,650
1936	.....	.....	.....	.....	3,794
1935	.....	.....	.....	.....	3,933
1934	.....	.....	.....	.....	3,490
1933	.....	.....	.....	.....	4,069
1932	.....	.....	.....	.....	4,426
1931	.....	.....	.....	.....	3,831
1930	.....	.....	.....	.....	3,816
1929	.....	.....	.....	.....	4,178

For Secondary School Inspections see pages 50 and 56.

Special Examinations.

In addition to the routine medical inspections, many children are specially examined by the doctor each year. The teachers submit any special case to him in the schools after the routine inspection is ended, or special cases may at any time be sent to the School Clinic.

Thus in 1938 the following were dealt with :—

“Specials” at School and Clinic	.....	2,537
(compared with 1,954 in 1937).		

Re-Examinations.

Then again, various additional examinations and re-examinations are carried out, both in the Schools and the Clinic in connection with the following up of defects. The number of such Re-inspections was 1,271 (compared with 1,586 in 1937).

5.—FINDINGS OF MEDICAL INSPECTION.

Out of 3,267 children examined in our Schools at the Routine Inspections during 1938, 229, or 7.05% were found to require treatment for one or more defects (see Table IIA, page 56). In addition, a number with defects required to be kept under observation although no actual treatment was necessary at the time. Table IIA in the Appendix (page 56), gives a return of the various defects found, whilst the number of children affected is shown as follows :—

Number of individual children found at Routine Medical Inspection to require treatment (excluding uncleanliness and dental diseases).

Group.	Number of Children		Percentage of children found to require treatment.
	Inspected.	Found to require treatment.	
Code Groups :			
Entrants	978	44	4.5%
Second Age Group	1149	93	8.1%
Third Age Group	1120	92	8.2%
Total (Code Groups)	3247	229	7.05%
Other Routine Inspections (Secondary Schools)	534	23	4.3%
Partially-sighted Class.	20	—	—

The proportion of children showing defects in all three groups is compared in the following table with the figures for England and Wales.

Return Showing

- (1) The number of defects found among 3,267 children in the three age groups and the partially-sighted class at the routine examinations, 1938.
- (2) The incidence of defects requiring treatment and observation per 1,000 children examined in 1938.
- (3) The average incidence of defects amongst school children throughout England and Wales.

Group of Defects.	Treatment.			Observation.		
	Number of Defects requiring treatment.	Incidence of Defects per 1,000 children inspected.	Incidence of Defects per 1,000 pupils in England and Wales in 1937.	Number of Defects requiring observation.	Incidence of Defects per 1,000 children inspected.	Incidence of Defects per 1,000 pupils in England and Wales in 1937.
Skin Disease....	9	2.7	9.7	—	—	2.3
Defects of Vision	125	54.6*	75.7*	13	5.6*	40.9*
Squint	11	3.3	7.9	4	1.2	4.8
Other Eye Diseases	8	2.4	6.4	1	.3	2.6
Defects of Hearing	—	—	3.0	3	.9	2.4
Otitis Media	—	—	3.9	—	—	1.4
Chronic Tonsillitis	52	15.9	21.5	184	56.3	48.1
Adenoids	3	.9	2.8	6	1.8	3.2
Adenoids and Chronic Tonsillitis	5	1.5	21.3	3	3.9	12.9
Other Nose and Throat Defects	—	—	6.8	—	—	6.9
Defects of Speech	—	—	1.3	4	1.2	3.0
Organic Heart Disease	—	—	1.6	6	1.8	3.5
Pulmonary Tuberculosis :						
(a) Definite	—	—	0.1	—	—	0.1
(b) Suspected	2	.6	0.3	—	—	0.5
Non-Pulmonary Tuberculosis	—	—	0.4	13	3.9	0.9
Epilepsy	—	—	0.2	2	.6	0.4
Chorea	—	—	0.4	15	4.5	0.5
Other Nervous Conditions	—	—	1.3	2	.6	2.3
Deformities :						
Rickets	—	—	1.0	7	2.1	2.8
Spinal Curvature	1	.3	2.5	5	1.5	2.2
Other Forms	4	1.2	9.4	16	4.8	8.9

* In calculating this figure the entrants have been left out.

The following are some of the points revealed by the year's work so far as the routine medical inspections by the School Medical Officer are concerned :—

(a) Nutrition and Malnutrition.

Close observation has been kept on the nutrition of children in our schools during the year.

Height and Weight.

The height and weight of every child is measured at the time of routine inspection, and the following table shows the average at different ages :—

	Heights.				Weights.					
	Boys		Girls		Boys			Girls		
Entrants—	ft.	ins.	ft.	ins.	st.	lb.	ozs.	st.	lb.	ozs.
5 years	3	4.9	3	4.8	2	12	1.2	2	10	7.2
6 years	3	6.2	3	6	3	0	6.5	2	12	12.4
7 years	3	8.4	3	9.2	3	4	15.7	3	5	2.4
8 years	3	10.2	3	10.1	3	8	6.3	3	7	2.8
Second Age Group—										
8 years	4	0.7	4	0.1	3	13	9	3	12	4
9 years	4	2.1	4	2	4	4	4.6	4	3	0.1
Third Age Group—										
12 years	4	7.4	4	8.3	5	6	13.9	5	10	1.7
13 years	4	9.6	4	10.4	6	1	5.7	6	4	11.8

Notes.—In the Entrant Group the average age is approximately as shewn, whereas in the Second and Third Age Groups the average age is higher than the age shewn by approximately four months.

It is to be observed from these measurements that the average of recent years has been well maintained.

Nutrition.

Great attention has been paid to the problem of the standard of nutrition of children attending our schools, with a view to the discovery of cases of under-nourishment.

The Board of Education in Memorandum 124, issued at the end of 1934, pointed out that it was desirable that statistical returns from all Local Education Authorities should be classified in a precise and uniform manner.

The returns (Table B, page 57) are, therefore, in accordance with this classification divided into Excellent, Normal, Slightly Sub-normal and Bad.

Nutrition.

				A	B	C	D
Age Groups.				Excellent.	Normal.	Slightly Sub-normal.	Bad.
Entrants—							
Boys, Age	5	.....	169	26	137	5	1
„ „	6	.....	267	38	221	8	—
„ „	7	.....	43	5	36	2	—
„ „	8	.....	12	2	10	—	—
„ „	9	.....	2	—	2	—	—
Girls, Age	4	.....	1	1	—	—	—
„ „	5	.....	161	27	121	12	1
„ „	6	.....	259	45	203	8	3
„ „	7	.....	46	13	33	—	—
„ „	8	.....	18	5	11	2	—
Total			978	162	774	37	5
Percentage				16.56%	79.14%	3.78%	.51%
Second Age Groups—							
Boys, age	8	.....	530	46	422	54	8
„ „	9	.....	48	4	39	5	—
„ „	10	.....	4	—	4	—	—
Girls, age	8	.....	527	85	358	75	9
„ „	9	.....	38	6	24	8	—
„ „	10	.....	2	1	1	—	—
Total			1149	142	848	142	17
Percentage				12.35%	73.80%	12.35%	1.47%
Third Age Groups—							
Boys, age	12	.....	538	67	376	87	8
„ „	13	.....	36	4	27	5	—
Girls, age	12	.....	519	68	356	78	17
„ „	13	.....	27	1	23	2	1
Total			1120	140	782	172	26
Percentage				12.50%	69.82%	15.35%	2.32%
Partially-sighted Class—							
			20	1	15	3	1
Percentage				5.0%	75.0%	15%	5.0%
Elementary—							
Total			3267	445	2419	354	49
Percentage				13.62%	74.04%	10.83%	1.49%
Secondary Schools—							
Boteler Grammar, Boys			201	24	164	12	1
Secondary, Boys			175	20	139	14	2
„ Girls			158	38	104	15	1
Total			534	82	407	41	4
Percentage				15.35%	76.21%	7.67%	.74%
Jr. Instruction Centre			438	84	288	60	6
Percentage				19.17%	65.75%	13.69%	1.36%
Grand Total			4239	611	3114	455	59
Percentage				14.41%	73.46%	10.73%	1.39%

(b) **Uncleanliness.**

Out of the 3,267 children examined by the doctor at the Routine Inspections only 3, or .09%, were found to have verminous heads in greater or lesser degree. This continues to show improvement, as is evidenced from the following table for the past 10 years. In fact out of the 3, none was sufficiently serious to warrant exclusion from school.

1929	....	....	....	....	....	3.03%
1930	....	....	....	....	....	4.3%
1931	....	....	....	....	....	3.3%
1932	....	....	....	....	....	2.3%
1933	....	....	....	....	....	1%
1934	....	....	....	....	....	1.3%
1935	....	....	....	....	....	1.3%
1936	....	....	....	....	....	.65%
1937	....	....	....	....	....	.19%
1938	....	....	....	....	....	.09%

It must be emphasised, too, that the standard of cleanliness expected is much higher now, and compared with 1929, for instance, the .09% of 1938 might almost be considered "negligible."

It must be remembered that the early supervision of the scholars in the schools by our School Nurses accounts for a good deal of this improvement.

We have again to acknowledge our indebtedness to the Police Clothing Fund which, as usual, has been of great assistance to the poorer families.

(c) **Minor Ailments and Diseases of the Skin.**

Impetigo amongst school children has greatly diminished of recent years, and we rarely find those severe cases of involvement of the scalp that used to be so common, especially amongst girls, a few years ago. Out of 3267, children examined at routine inspections, 3, or .09%, were found to be suffering from impetigo.

No cases of ringworm of the scalp were found, but there were four cases of scabies.

The number of cases of conjunctivitis and blepharitis found during the year was 7 (.21%).

The continuous work of the Nurses in the schools contributes largely to the reduction in the minor ailments now discovered at routine inspections.

(d) **Visual Defects.**

68.16% of the children examined were found to have perfectly normal vision when examined at the school inspection amongst the two senior age groups, as the eyesight of the entrants is not tested unless in exceptional circumstances.

In the Intermediate and Leaver Groups, the vision of 2,252 children was examined and 128 children or 5.68% were found to require treatment.

The following table shows the results of the examinations of the two groups :—

Group.	No.	6/6	6/9	6/12	†W.G.	aT.	*N.G.I.
SECOND AGE GROUP. Examined.							
Boys—Age 8	521	364	87	12	24	32	2
„ „ 9	48	35	6	—	1	5	1
„ „ 10	4	2	1	—	—	1	—
Girls— „ 8	522	344	122	15	19	22	—
„ „ 9	37	16	16	—	2	3	—
„ „ 10	2	2	—	—	—	—	—
THIRD AGE GROUP.							
Boys—Age 12	538	384	71	11	36	31	5
„ „ 13	36	30	4	—	2	—	—
Girls— „ 12	518	340	81	10	53	33	1
„ „ 13	26	18	5	—	2	1	—
Total	2252	1535	393	48	139	128	9
Percentage		68.16	17.45	2.13	6.17	5.68	.39

*N.G.I.—No glasses improve.

†W.G.—Wearing Glasses.

aT.—Treatment required.

The following is a summary showing the degree of defect among the 131 children requiring treatment:—

Number referred for refraction for :—

Vision—6/12 in both eyes	....	....	....	....	....	....	1
6/12 in one eye and 6/9 in the other	....	....	....	....	....	....	3
6/18 in both eyes	....	....	....	....	....	....	23
6/18 in one eye and good or fair vision in the other	....	....	....	....	....	....	49
6/24 in both eyes	....	....	....	....	....	....	3
6/24 in one eye and 6/18 in other eye	....	....	....	....	....	....	4
6/24 in one eye and good or fair vision in the other	....	....	....	....	....	....	11
6/36 in both eyes	....	....	....	....	....	....	7
6/36 in one eye and 6/24 or 6/18 in the other	....	....	....	....	....	....	3
6/36 in one eye and good or fair vision in the other	....	....	....	....	....	....	7
6/60 in both eyes	....	....	....	....	....	....	1
6/60 in one eye and 6/36, 6/24, or 6/18 in other eye	....	....	....	....	....	....	—
6/60 in one eye and good or fair vision in the other	....	....	....	....	....	....	4
less than 6/60 in one eye and 6/36, 6/24, or 6/18 in other eye	....	....	....	....	....	....	1
less than 6/60 in one eye and good or fair vision in the other	....	....	....	....	....	....	3
With Squint	....	....	....	....	....	....	3
Glasses unsuitable and requiring re-examination	....	....	....	....	....	....	*5
							128

*Of the 5 cases requiring re-examination the degrees of defect were :—

Vision—6/18 in both eyes with glasses	....	....	....	....	4
6/24 " " " "	....	....	....	....	1
					<hr/> 5

(e) **Nose and Throat Defect.**

The total number of cases of nose and throat disease requiring treatment was 60 or 1.8%.

For the treatment of enlarged tonsils and adenoids and the policy pursued with regard to operations, see page 26.

(f) **Ear Disease and Defective Hearing.**

At Routine Inspections 11 cases of Aural Discharge were discovered, and 1 case of wax in ears. See remarks on prevention of deafness (page 27).

(g) **Dental Defects.**

The School Medical Officer refers to the Dental Officer for treatment all children with four or more decayed teeth, or any children who are obviously suffering from lack of attention to the mouth.

During 1938, 153 such cases were discovered.

(h) **Orthopædic and Postural Defects.**

Six children suffering from these defects were found at the inspection and those who were not already under treatment were referred to the Orthopædic Surgeon (see page 28).

(i) **Heart Disease and Rheumatism.**

Six cases of organic heart disease and 18 cases of functional heart disease were discovered, and kept under special observation on this account; 11 cases of anæmia were found during routine inspection, and kept under observation.

All these children and those exhibiting any rheumatic manifestations are kept under special supervision throughout the year.

All cases of Heart Disease, Chorea and Rheumatism are specially noted in the register of physically defective children.

(j) **Tuberculosis.**

Two cases of suspected tuberculosis were discovered at the Routine Inspection and were referred to the Tuberculosis Officer.

Reference is made in the section on Infectious Diseases to the incidence of tuberculosis amongst the school children in the borough (page 36).

(k) **Other Defects and Diseases.****ROUTINE INSPECTIONS.**

	Requiring treatment.	To be kept under observation.
Mumps	1	—
Ganglion	1	—
? Mental Deficiency	—	7
Hernia	—	2
Incontinence	—	2
Posture	—	1
Old abscess leg	—	1
Scars on Neck	—	1
Osteoma	—	1
Rheumatism	—	2
Nose Bleeder	—	1
Old Empyema	—	1
Debility	—	4
Weakness Right Foot	—	1
Bone Disease Leg	—	1
Old Osteotomy	—	1
Ozoena	—	1
Nephritis	—	1
Total	2	28

SPECIAL INSPECTIONS.

	Requiring treatment.	To be kept under observation.
Sore Throat	1	—
Muscular Weakness	1	—
Osteomyelitis	2	—
Fractured Femur	2	—
Synovitis Left Knee	1	—
? Bone Disease, etc.	1	—
Round Shoulders	1	—
Weakness following Scarlet Fever	—	1
? Mental Deficiency	—	8
Incontinence	—	2
Debility	—	1
Rheumatism	—	1
Total	9	13

Exclusions.—All children suffering from contagious disease who may be a danger to the other children, and all cases in which the condition necessitates absence from school, are at once excluded by the A.S.M.O. at the time of his inspections. Slight cases are not excluded, but referred for treatment to the Nurses at their bi-weekly visits. The following are the cases excluded during 1938 at both routine and special inspections. In addition, 97 children were referred to the Nurses for treatment in schools as not being serious enough to exclude :—

	Exclusions.	Treatment in School.
Uncleanliness—Head	—	5
Body	—	19
Scabies	4	—
Impetigo	1	3
Other Skin Diseases	2	—
Blepharitis	—	8
Conjunctivitis	—	1
Aural Discharge	—	44
Wax in Ears	—	8
Sore Throat	1	—
Defective Clothing	—	7
Defective Footgear	—	2
Mumps	1	—
Total	9	97

Further examination of cases selected at the Inspections in the Schools.

The further examination of certain cases is made at the Inspection Clinic when necessary. These cases consist of children whom it is impossible to examine thoroughly during the Routine Examination.

In 1938 there were 124 such examinations made of 116 children. When a defect was discovered it was entered on the schedule card, and has been included in the foregoing statistics as though found at the original Routine Inspection.

Other Medical Inspection Work.

In addition to the Routine inspection work and the examinations of children in the schools in the afternoons, a large amount of work is done by the A.S.M.O. at the Clinic every morning (see page 20).

6.—“FOLLOWING-UP” OF CHILDREN SUFFERING FROM PHYSICAL DEFECTS AND WORK OF THE SCHOOL NURSES.

The procedure adopted in the following-up of the cases to see that defects found at Routine and other inspections are dealt with promptly and satisfactorily has been explained in former Reports.

The Tables at the end of the Report show the results obtained, but no record is given of the actual number of re-examinations made in each case by the doctor, or of the number of visits paid by the Nurses and School Attendance Officers in advising parents and in offering facilities for treatment.

Only as a last resort are parents summoned to attend before the School Medical Service Committee for not obtaining satisfactory treatment for their children (see page 45).

Work of the School Nurses.

The usual large amount of work has been carried out during the year 1938 in a very thorough manner in the Clinic, in the homes, and in the schools, by the Nurses—Miss Brown, Miss Griffith, Miss Wright, Miss Coventry, Miss Fletcher. and Miss Sherman.

(a) IN THE SCHOOLS.

The examination and dressing of the children are carried out either in the medical room or staff room in the newer schools, or, where there is no such accommodation, in the cloak room or sometimes in a screened-off portion of a class room (see page 22).

The work comprises dressings of discharging ears, sore eyes, impetigo, eczema, supervision of minor ailments which are being treated at home, orthopædic cases, and all children who have been found unsatisfactory at a surprise visit, either nits, unclean, defective footgear, or clothing.

Classes in which cases of Scarlet Fever or Diphtheria have occurred are examined and suspicious cases excluded.

Any children sent by the teachers for sore throats, defects or neglect are also seen, and noted.

On Wednesdays surprise visits are paid to the schools by the nurses. Every child in the school is seen by the nurse and examined for nits, cleanliness of body and clothing, and defective footgear. The names and addresses of all unsatisfactory children are taken and Home Visits are made whenever possible. All such children are seen at subsequent visits to the school.

(b) IN THE HOMES AND IN THE SCHOOL CLINIC.

One nurse attends the minor ailments clinic in the mornings and routine medical inspections in the schools during the afternoon, followed by work in the clinic again at 4 p.m. attending to "after-school" cases. A large number of miscellaneous cases have been dealt with in the homes and in the schools.

Full particulars of this work are given on page 20, and apart from this the following is a summary of the activities of the Nurses for the year 1938 :—

Visits paid to Schools to treat minor ailments	1,746
No. of Dressings in School (see page 22)	24,054
Visits to homes of children (in many cases assisting with treatment)	2,351
Attendances at Routine Medical Inspection in the Schools with the A.S.M.O.	216
Notices sent to teachers with reference to excluded children	597
"Surprise Visits" to Schools	184
Special Visits (to Schools) re Infectious Disease	135
Cases of tonsils and adenoids after operation kept under observation	222

7.—TREATMENT OF DEFECTS OF CHILDREN DURING 1938.

In endeavouring to secure treatment for ailing school children, use is made of all existing agencies, and in addition a large number of cases are referred under supervision for treatment in their own homes.

Whenever the circumstances warrant it, cases are induced to obtain treatment from a private medical practitioner.

A list of the days and hours of attendance at the various Clinics is given on page 2.

A.—Minor Ailments.

The Minor Ailment Clinic is open each day from 9 to 12 noon.

Dressings of minor ailments, 9.30 to 12 noon.

“After-School” cases, 4 to 5 p.m., Mondays to Fridays.

With regard to the work in general, there has been a gradual tendency for a decrease in the incidence of minor ailments amongst school children, dating back to the introduction of the system of bi-weekly treatment by the Nurses in the schools.

This is shown in the following table :—

INCIDENCE OF MINOR AILMENTS.

		No. of children attending		No. having Home Treatment	No. of Treatments in the school Dressings
		Inspection Clinic	Treatment Clinic		
1922	.....	1,552	560	662	47,513
1923	.....	1,113	349	362	37,451
1924	.....	1,054	377	296	34,337
1925	.....	925	395	218	33,529
1926	.....	1,069	390	305	26,779
1927	.....	2,535	1,633	303	31,639
1928	.....	1,348	844	172	36,638
1929	.....	897	388	247	28,139
1930	.....	858	326	306	27,025
1931	.....	953	363	310	32,837
1932	.....	889	365	251	29,319
1933	.....	810	363	215	23,763
1934	.....	751	364	192	30,610
1935	.....	560	262	157	24,276
1936	.....	600	291	166	21,514
1937	.....	587	297	173	22,663
1938	.....	781	341	279	24,054

Minor ailments are potential sources of more serious conditions if neglected, and they certainly lead to a considerable loss of attendance at school of the children affected, thereby interfering considerably with their education.

Not only is the incidence of these ailments being reduced from year to year, but the severity of the conditions found is on the whole much less than in former years.

Inspection Clinic. (For cases referred by School Nurses, School Teachers, School Attendance Officers, and others.)

		Boys.	Girls.	Total.
Ringworm (Scalp)....	....	8	4	12
„ (Skin) ....	....	7	5	12
Conjunctivitis ....	....	36	26	62
Blepharitis ....	....	3	2	5
Aural Discharge ....	....	6	8	14
Impetigo (Scalp) ....	....	29	49	78
„ (Skin) ....	....	60	47	107
Scabies ....	....	62	62	124
Pediculosis (Scalp) ....	....	10	224	234
„ (Body) ....	....	8	4	12
Eczema ....	....	5	6	11
Corneal Ulcers ....	....	1	2	3
Miscellaneous ....	....	55	45	100
Rhinitis ....	....	4	3	7
		<hr/> 294	<hr/> 487	<hr/> 781

(In 1937 the numbers were : Boys 251, Girls 336 ; Total 587.)

The miscellaneous cases consist of various ailments such as sores on the feet or legs, herpes, burns, bruises, abscesses, &c.

These cases were dealt with as follows :—

			Boys.	Girls.	Total
Referred to private practitioners....	....	....	55	44	99
„ „ Infirmary ....	....	....	5	1	6
„ „ School Clinic (excluded from school) ....	....	....	172	169	341
„ „ treatment at home ....	....	....	41	238	279
Found fit for school on first attendance....	....	....	21	35	56

So far as the Local Authority is concerned the treatment of minor ailments may be divided into 3 groups :—

1. Treatment at the School Clinic.
2. Treatment in the Schools.
3. Treatment in the Homes.

(1)—Treatment at the School Clinic.

When a child is suffering from an ailment that from its contagiousness may spread to other children, or when the attendance of a child in school may be harmful for other reasons, the case is excluded for treatment, and in the majority of instances of minor ailments this treatment is sought at the School Clinic.

The following table gives a summary of the cases dealt with in this way :—

Number of Cases Treated at the Clinic.

Disease.	No. of cases treated in School Clinic.	Total No. of attendances.	Average No. of attendances per case.	No. of days under treatment.	Average No. of days under treatment.
Scabies	28	429	15.3	490	17.5
Ringworm (Skin)	10	78	7.8	90	9.0
„ (Scalp)	11	354	32.1	474	43.0
Conjunctivitis.....	53	244	4.6	282	5.3
Impetigo (Skin)	89	519	5.8	962	10.8
„ (Scalp)	76	617	8.1	802	10.5
Blepharitis, &c. ...	5	23	4.6	23	4.6
Aural Discharge....	9	44	4.8	108	12.0
Eczema	4	29	7.2	40	10.0
Rhinitis	6	95	15.8	209	34.8
Miscellaneous.....	50	266	5.3	314	6.2
Total	341	2698	7.9	3794	11.1
In 1937	297	2234	7.5	2718	9.1

This total of 341 which is also shown in Table IV., Group I. in the Appendix is not strictly comparable with statistics from other areas as only the severe cases are referred to the Clinic. Most cases of minor ailments are dealt with in the schools daily by the School Nurses.

In addition 234 children put in 596 attendances at the Clinic after school hours for defects which did not render it necessary for them to be absent from school.

	Boys.	Girls.	Total.
Ringworm (Scalp)	—	—	—
Ringworm (Skin)	12	9	21
Conjunctivitis	25	31	56
Impetigo (Skin)	119	54	173
Impetigo (Scalp)	40	39	79
Blepharitis	15	9	24
Aural Discharge	19	34	53
Scabies	5	—	5
Miscellaneous	109	76	185
	344	252	596

Miscellaneous cases consist of boils, burns, eczema, injuries, septic sores, ped. cap., nasal discharge.

Ringworm of the Scalp.

There has been a decrease both in the incidence of ringworm of the scalp and in the length of time taken to cure this disease since the provision of X-ray treatment for the condition by the Local Authority.

During 1938 the total cases dealt with in the Clinic were 11, of which 3 received X-ray treatment.

(2)—Treatment in the Schools.

Our arrangements for dealing bi-weekly with minor ailments in the schools have been detailed in previous Reports.

Altogether the Nurses paid 1,746 visits to the schools, an average of 79.3 to each, not including "surprise" visits.

When considered necessary, the Nurses exclude any cases of contagious or infectious disease.

In this way 125 children (63 boys and 62 girls) were excluded for infectious diseases, 353 children (119 boys and 234 girls) for contagious diseases and 7 children (6 boys and 1 girl) for uncleanness.

In addition the Nurses submitted a list of children to the School Medical Officer for further examination for suspected defects.

The amount of work done in this connection by the School Nurses in 1938 is as follows :—

NUMBER OF DRESSINGS IN THE SCHOOLS.

	Boys.	Girls.	Total.
Impetigo (Scalp)	366	258	624
„ (Skin)	7843	5611	13454
Eczema	584	575	1159
Eyes	2204	1707	3911
Ears.....	2633	2273	4906
	<hr/> 13630	<hr/> 10424	<hr/> 24054

There are approximately 200 school working days and this shows that more than 120 cases of minor ailments are dealt with by the Nurses in the schools each day apart from the work of the Clinic.

The total number of children attended to each year in school is seen from the following figures :—

			Number of School Dressings.
1938	....	....	24054
1937	....	....	22663
1936	....	....	21514
1935	....	....	24276
1934	....	....	30610
1933	....	....	23763
1932	....	....	29319
1931	....	....	32837
1930	....	....	27025
1929	....	....	28139
1928	...	....	36638

In addition to the dressings and apart from the work of "surprise visits," the Nurses supervise cases of uncleanliness and pediculosis, and in this connection 342 boys and 1,275 girls were examined on 1,271 and 18,404 occasions respectively, or an average of 3.7 for the boys and 14.4 for the girls.

(3)—Treatment in the Homes.

Certain cases are referred for treatment in their own homes, and have to attend from time to time at the Clinic for instruction and supervision as to the results of treatment.

Such conditions as pediculosis, uncleanliness, scabies, ringworm of the skin, cuts and bruises and various septic sores are generally dealt with in this way.

During 1938 the following received attention :—

	Boys.	Girls.	Total.
Pediculosis of the head	5	194	199
Pediculosis of the body and uncleanliness	4	2	6
Scabies	32	42	74
Miscellaneous	—	—	—
	41	238	279

There is a slight increase in the number of cases, compared with the previous year.

The School Nurses visit the homes to advise the mothers with regard to treatment and to see that it is adequately carried out. Altogether 2,351 visits were paid in 1938.

B.—Treatment of Visual Defects.

Our arrangements with the Warrington Infirmary for dealing with cases of refraction have been continued as usual during the year.

From Table IV., Group II., on page 62, it will be seen that 325 cases of defective vision were dealt with during the year.

288 under the L.E.A.'s scheme,

9 by private practitioners,

28 otherwise.

111 cases carried forward into next year

Squint Operations.

Number of operations in 1938 = 2 (2 boys).

Provision of Spectacles.

The cost of spectacles in practically every instance is defrayed by the parents.

During 1938, 197 pairs were provided by the Local Education Authority. The cost of these, varying from 5/6 per pair for cylindrical and compound lenses, to 3/6 for spherical lenses, was recovered from the parents.

In addition, 20 children were supplied with spectacles by the Public Assistance Committee, in cases where the parents were in receipt of relief, and unable to pay the cost.

Prevention of Blindness.

Some remarks on this subject as affected by features in our School Medical Service were given in the Reports for 1933 and 1934.

A draft copy of the letter that is sent to parents when a child with defective vision leaves school has been published previously.

During 1938, 130 such letters were sent, and in several instances parents consulted the Medical Officer with reference to facilities available for advice and treatment for their children after leaving school.

Partially-Sighted Class (Evelyn Street Council School).

A class for partially-sighted children was established at Evelyn Street Council School, and the children first attended on 18th February, 1935. During the year 1938 altogether 28 attended the class at one time or another. The highest number of children in the class at any time was 23, and on the 31st December, 1938, 17 children were in attendance. Their classification according to type of visual defect was as follows :—

Myopia	....	....	....	....	16
Hypermetropia	....	....	....	....	6
Nystagmus	....	....	....	....	2
Astigmatism....	....	....	....	....	2
Old Corneal Opacity	....	....	....	....	1
Dislocation of Lenses	....	....	....	....	1
					—
					28
					—

During the year 1 child left school at the age of 14 years. The children are selected in the first place from the possible cases by the A.S.M.O., and every case is submitted to the Ophthalmic Surgeon for examination and report.

In those cases where he certifies them as suitable for admission to the class, the parent is informed by letter of the eye condition, and accommodation in the class is offered.

Omnibus contracts are issued to those children who have any distance to travel, and who can use the bus routes. Arrangements are made for those who stay at school for their mid-day meal to have a hot drink, free of charge.

The Ophthalmic Surgeon makes a quarterly visit to the class and reports on his visit, to the Committee. At this visit he also reports on the suitability for employment of children who are about to leave school under the age qualification. This report in all cases is transmitted to the Juvenile Employment Officer. Every child is re-examined individually by the specialist at intervals of not more than six months, to ascertain whether there has been any improvement or deterioration in the ophthalmic condition, and in some cases alteration in the glasses worn is prescribed. The A.S.M.O. makes a Routine Medical Inspection of all the children in attendance on the date of his visit.

The School Dentist makes a Dental Inspection of all the children.

A School Nurse makes a visit to the class twice weekly for the treatment and supervision of minor ailments, particular attention being paid to eye condition and the wearing of glasses where prescribed.

The difficulty is, however, that some of these children persist in reading ordinary type out of school hours and at home.

C.—Treatment of Defects of Nose and Throat.

From Table II. A. (page 56) it will be observed that the following defects of the nose and throat were referred for treatment :—

				At routine inspections.	At "special" examinations.
Chronic Tonsillitis	....	....	....	52	171
Adenoids only	....	....	....	3	30
Chronic Tonsillitis and Adenoids			....	5	57
Other conditions	....	....	....	—	5
				<hr/> 60	<hr/> 263
					<hr/> 323

In 1937 there were 273 similar cases, and 312 in 1936.

A large proportion of the "special" examinations are cases referred by general practitioners asking that the child be dealt with by the School Authority.

283 received treatment during the year as follows (see page 63, Table IV., Group III.) :—

By operation	{ Under the L.E.A.'s Scheme	....	....	....	218
	{ By private practitioner	....	....	....	2
	Other forms of treatment	....	....	....	63
					<hr/> 283 <hr/>

The following is a summary of the cases dealt with at Warrington Infirmary for which we are indebted to Mr. Archer, who carries out the work :—

SUMMARY OF NOSE AND THROAT CASES DEALT WITH IN 1938.

Defects.	Satisfactory after operation.		Unsatisfactory after operation.		Totals.		Grand Total.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Tonsils	2	2	—	—	2	2	4
Tonsils and Adenoids	93	108	—	2	93	110	203
Adenoids	—	—	—	—	—	—	—
Other Defects	8	6	—	—	8	6	14
Totals	103	116	—	2	103	118	221

G. E. ARCHER.

The children who attended for further treatment for other defects included cases of chronic rhinitis and otitis media.

For many years now, great care has been exercised in the selection of cases of children requiring operative treatment for enlarged Tonsils and Adenoids and such a course has only been advised when the child shows signs of deafness, or of marked nasal obstruction, or other serious defects as a result.

A special memorandum, drawn up by the Medical Officer, on the subject, which was circulated to the Medical Officers of the Department, was published in a previous Report.

Close attention has been given to the question of choice of the anæsthetic used in tonsil and adenoid operations in accordance with the warning in the Report of the Chief School Medical Officer.

Prevention of Deafness.

From the early days of medical inspection, the Local Authority has provided treatment for minor ailments, including cases of aural discharge, but many of these require specialist advice and treatment if early cure is to be obtained and deafness or other disaster eventually avoided.

A large amount of ear disease results from infectious diseases, such as measles, scarlatina, diphtheria and meningitis. An aural specialist is attached to our Isolation Hospital and available for every case of these complications requiring his aid. The same specialist also holds regular consultation sessions for children under five years of age, and cases from the Infant Welfare Centres or elsewhere are referred to him, and, when necessary, are admitted to the Borough General Hospital to be operated on by him.

It has been recognised that facilities similar to those available for pre-school children should be provided within the School Medical Service; it was thought that arrangements would be made during the year for this purpose. It was, however, decided to await the opening of the Extension of the Borough General Hospital where accommodation was to be provided before completing the scheme. When this becomes operative it will necessitate the attendance of the specialist for one or two sessions per month at the commencement, with additional attendances for operative treatment as the occasions arise.

The ionization work at the Orthopædic Clinic could then be transferred under his direct supervision, whilst intermediate treatment would be carried out as heretofore by our own Staff.

D.—Treatment of Dental Defects.

Our aim has always been to secure an initial dental inspection of every child on its entry into school life, to be followed by an annual re-examination until the child ceases to attend school.

The inspections were commenced on the 15th December, 1937, and the whole of the children attending the schools in the Borough had been inspected by the 23rd November, 1938.

I am indebted to the School Dental Surgeons (Mr. W. C. Parr, and Miss I. M. Candon) for the following report on their work :—

Ladies and Gentlemen,

Routine Inspection for the year was commenced on December 15th, 1937, and completed by November 23rd, 1938.

Inspection of the complete school population, including the Secondary and Boteler Grammar Schools was thus completed, for the first time, within the year.

ELEMENTARY SCHOOLS.

The total number of Routine Inspections was 10,132, of which number 9,214 were found to require treatment, and 4,740 were actually treated.

In addition, 1,353 children attended as casuals and were treated. This number is mainly represented by those who either refused treatment at the time of inspection, or were unable to attend at the time of appointment.

During the year, 1,758 teeth were filled, and 245 "Other Operations" were performed. Under the latter heading are classified a variety of treatments such as :—Scaling and Polishing ; treatment of Gingivitis and other allied gum conditions, etc.

7,530 teeth were extracted mainly under general anæsthetics.

SECONDARY SCHOOL.

558 children were examined at routine inspection ; of these 392 were found to require treatment and 146 were treated. 105 teeth were extracted ; 195 teeth were filled, and 55 "Other Operations" were performed.

JUVENILE INSTRUCTION CENTRE.

Inspection and treatment of centre was commenced this year in July.

W. C. PARR,
I. M. CANDON,
School Dental Surgeons.

E.—Orthopædic Treatment.

The Orthopædic Clinic at the Borough General Hospital, under Mr. Harman Taylor, Liverpool, was carried on successfully, as in previous years.

No. of first examinations by the Surgeon	....	....	....	31
No. of cases dealt with at the Clinic during the year	....	....	....	108
No. of cases in which operations have been performed	....	....	....	5
No. of children who have attended the Clinic for remedial treatment	....	....	....	48
No. of cases in which appliances have been ordered	....	....	....	13*
No. of X-ray examinations	....	....	....	19

*This includes repairs, alterations, &c. (10 cases).

The types of cases were as follows :—

Pigeon Breasted	....	....	....	....	....	1
Flat Foot	....	....	....	....	....	9
Abducted Feet	....	....	....	....	....	1
Inturned Feet	....	....	....	....	....	3
Webbed Toes	....	....	....	....	....	1
Hammer Toe	....	....	....	....	....	1
Club Foot	....	....	....	....	....	9
Rickets	....	....	....	....	....	4
Knock Knee	....	....	....	....	....	5
Spastic Paralysis	....	....	....	....	....	2
Spasticity, Legs	....	....	....	....	....	1
Early Perthes Disease	....	....	....	....	....	1
Weakness of Limbs	....	....	....	....	....	5
Defective Gait	....	....	....	....	....	3
Infantile Paralysis	....	....	....	....	....	17
Paresis	....	....	....	....	....	3
Round Shoulders	....	....	....	....	....	3
Curvature of Spine	....	....	....	....	....	12
Pronounced Scaphoids	....	....	....	....	....	1
Absence of First Meta Carpal	....	....	....	....	....	1
Deformity of Finger	....	....	....	....	....	4
Webbed Fingers	....	....	....	....	....	1
Exostosis (base of right thumb)	....	....	....	....	....	1
Osteomyelitis	....	....	....	....	....	3
? Bone Disease	....	....	....	....	....	1
Ganglion	....	....	....	....	....	1
Fracture of a Carpal Bone	....	....	....	....	....	1
Fracture Femur	....	....	....	....	....	2
Deformity of Ribs	....	....	....	....	....	1
Weakness Left Shoulder	....	....	....	....	....	1
Spina Bifida and Paralysis Left Foot	....	....	....	....	....	1
Deformity of Ears	....	....	....	....	....	1
Hip Disease and Dislocation	....	....	....	....	....	1
Fusion of Ribs	....	....	....	....	....	1
? Hip Disease	....	....	....	....	....	1
Enlarged Bursa Right Knee	....	....	....	....	....	1
Paralysis of Facial Nerve	....	....	....	....	....	1
Synovitis Left Knee	....	....	....	....	....	2
						<hr/> 108 <hr/>

OPERATIONS, 1938.

Plaster Application	....	....	....	....	....	3
Bone Grafting	....	....	....	....	....	1
Excision of Ganglion	....	....	....	....	....	1
						<hr/> 5 <hr/>

MASSAGE, ELECTRICAL TREATMENT & REMEDIAL EXERCISES—

					No. of children.	No. of attendances.
January	....	....	....	....	15	83
February	....	....	....	....	15	78
March	....	....	....	....	17	98
April	....	....	....	....	15	74
May	....	....	....	....	15	80
June....	....	....	....	....	17	62
July ....	....	....	....	....	18	65
August	....	....	....	....	14	67
September	....	....	....	....	16	94
October	....	....	....	....	15	77
November	....	....	....	....	22	108
December	....	....	....	....	17	78
					<hr/> 196	<hr/> 964
Average per month	....	....	....	....	16	80

IONIZATION TREATMENT—

Number of cases of Otorrhœa examined (new cases)	....	....	19★
Number of cases dealt with at the Clinic during the year	....	....	31
Number of cases discharged cured	....	....	18
Number of cases discharged—unsuitable for Ionization	....	....	3

★ Includes 2 Re-admissions.

330 attendances. Cost £33 0s. 0d.

IONIZATION TREATMENT—

	No. of children.	No. of attendances.
January	7	35
February	6	22
March	6	24
April	3	9
May	7	17
June	8	40
July	8	23
August	9	28
September	8	28
October	9	28
November	8	35
December.....	9	41
	<hr/> 88	<hr/> 330
Totals	88	330
	<hr/> 7	<hr/> 27
Average per month	7	27

RESULTS OF ORTHOPAEDIC TREATMENT.

Cases Discharged—No further Treatment Required.

Flat Foot	....	....	....	....	....	....	4
Rickets	....	....	....	....	....	....	1
Knock Knee	....	....	....	....	....	....	2
Defective Gait	....	....	....	....	....	....	1
Round Shoulders	....	....	....	....	....	....	2
Club Foot	....	....	....	....	....	....	5
Weakness of Foot	....	....	....	....	....	....	1
Curvature of Spine	....	....	....	....	....	....	2
Infantile Paralysis	....	....	....	....	....	....	5
Deformity of Fingers	....	....	....	....	....	....	2
Hammer Toe	....	....	....	....	....	....	1
Inturned Feet	....	....	....	....	....	....	3
Paralysis of Facial Nerve	....	....	....	....	....	....	1
Synovitis Left Knee	....	....	....	....	....	....	2
Fracture Femur	....	....	....	....	....	....	1
							<hr/> 33 <hr/>

Over Age—Transferred to Adult Clinic.

Osteomyelitis	1
---------------	------	------	------	------	------	------	---

I have to thank Mr. Harman Taylor for the following report on the work for the year :—

Dear Sir,

During the year, 1938, the Orthopædic Clinic has been doing its work on the usual lines. The most interesting feature of the year has been the fact that there has been no single case of any gross disability. In all, there were 31 new cases examined, and these consisted of school children suffering from minor disabilities, such as round shoulders and flat feet. Only in five of these cases was it necessary for an operation to be performed. The remaining cases were of such a nature that they could be rectified by simple remedial exercises given to the patients by the Masseuses. These exercises, of course, are all supervised by the Surgeon. It will be noted that a comparison with former years, shews that the cases requiring operation have reached a low level, namely, five.

There have been no cases of Infantile Paralysis or of severe rickets requiring operative procedure. The fact is, the diminution in the number of cases of rickets, must be put down to the early treatment given to children prior to their entering school age. On leaving school, many of the cases for the sake of interest, have been kept under observation at the Adult Clinic to see how they fared now that they had finished school and had entered into various occupations in life. I am pleased to state that in no single case has there been a breakdown, and so each of these children who have received such careful attention during the years that they were at school, have been able to hold that position in so far

as their physique is concerned. This is, indeed, a very satisfactory comment on the work that has been done in the Clinic during the years it has been in existence.

One can now forecast the view that in the years to come, the number of serious disabilities that require to be treated during childhood's days at school, will be few and far between, as under the present scheme in connection with the Maternity and Child Welfare work, cases of rickets, infantile paralysis and deformities such as club feet and wry neck, are given treatment at an early stage in the child's disability and so when it reaches the age when it becomes the care of the Education Authority, the major part of the disability has already been dealt with, and so it is but a case of supervision and an occasional "refresher" course in the way of Remedial Exercises which is required.

The whole scheme has worked so admirably, it is a pleasure for me to state that the team work exhibited has been of high degree of efficiency. It is only with this efficient co-operation on the part of all concerned, that such a high standard of efficiency has been achieved in this Clinic.

Yours faithfully,

HARMAN TAYLOR.

F.—Treatment of Uncleanliness.

The "surprise" visits to the schools were carried out as usual during the year.

Altogether 2,496 children were found in a more or less uncleanly condition at these inspections, as follows :—

	Boys.	Girls.	Total.
Nits	198	1906	2104
Unclean body	121	37	158
„ clothing	198	36	234
	<hr/> 517	<hr/> 1979	<hr/> 2496

In addition to the above, however, 47 were in such a state as to warrant exclusion from school (7 boys and 40 girls).

As might be expected, the large majority of cases of pediculosis of the scalp occurred in girls.

The Nurses again tried to obtain a high standard of cleanliness, but still report that in a minority of cases they meet with disappointment, owing to the apparent apathy and indifference of a certain class of parent. Even after many visits to the same homes little improvement is effected in such cases.

In only a few instances could the uncleanly condition of the child be attributed to poverty or to the size of the family.

“Surprise” Visits.

For many years it has been the custom for the school nurses to pay surprise visits to the schools to discover cases of uncleanness. These visits which at one time were of prime importance are not now quite as essential as they were, owing to the fact that the nurses attend all the schools twice weekly and have many opportunities of cleanliness surveys.

During 1938, an average of 8.3 surprise visits were paid to each school in the Borough. This average is somewhat higher than formerly.

There are 46 departments in the 22 schools, and each department is visited at least once each term :—

The following are the particulars of the “surprise” visits for the past 9 years :—

Year	1930	1931	1932	1933	1934	1935	1936	1937	1938
Number of Schools in the Borough	23	23	21	22	24	21	23	22	22
Average number of visits per annum paid by Nurses to school	9.56	13.78	11	9	10.3	6.5	6.2	10.7	8.3
Total number of examinations made by School Nurses of children	35181	41354	28408	30598	43254	40573	37773	27353	34963
Number of children found unclean (2496), excluded	83	101	95	57	59	41	43	53	47
Number found suffering from minor ailments (130), excluded	26	92	33	34	71	55	79	44	77

Legal Proceedings are taken when necessary under the School Attendance Byelaws, but no action was required last year.

G.—Treatment of all Other Defects.

The other defects found at Routine Inspection, except infectious diseases and tuberculosis which are referred at once to the Health Department, received consideration as follows :—

	Referred for treatment.	Treated.	Still under observation	Left School
Otorrhœa	1	1	—	—
Total	1	1	—	—

In the first instance we advise these cases to receive treatment from their own doctor. If the parents cannot afford this we assist them in obtaining a recommendation for attendance at the local Infirmary, or, if necessary, from the Domiciliary Medical Services. The Council of Social Service, British Red Cross Society, and United Services' Fund have all rendered valuable service in defraying the expense of sending children to special institutions or in providing extra nourishment and clothing.

Tuberculosis.

All children suffering from or suspected to be suffering from this disease, are referred to the Tuberculosis Dispensary.

(a) Dispensary.

During 1938 there were the following examinations :—

			No. of Cases.	No. of Examinations.
Tuberculosis of lungs	....	....	7	7
Suspected cases and contacts	....	....	95	154
Tuberculosis of glands	....	....	38	70
„ „ abdomen	....	....	10	26
„ „ bones and joints	....	....	14	29
„ „ other organs	....	....	2	3
Totals	....	....	166	289

An important point to note is the number of children kept under observation once they are suspected or have been in contact with cases of tuberculosis. In 1938, 154 examinations were made of 95 such cases.

Treatment has been provided at various institutions, as follows :—

(b) In Residential Institutions.

27 children of school age received in-patient treatment at the following institutions :—

Hefferston Grange Sanatorium	....	....	....	5
Borough General Hospital	....	....	....	20
Warrington Infirmary	....	....	....	2
Total	....	....	....	27

The cases were as follows :—

Tuberculosis of lungs	....	....	....	....	....	2
„ „ glands	....	....	....	....	....	9
„ „ abdomen	....	....	....	....	....	4
„ „ knee	....	....	....	....	....	1
„ „ hip	....	....	....	....	....	1
„ „ spine	....	....	....	....	....	4
„ „ skin	....	....	....	....	....	1
„ „ Meningitis	....	....	....	....	....	2
Observation cases	....	....	....	....	....	3
						<hr/> 27 <hr/>

Of the 27 cases, 24 were discharged during the year, and 3 were still receiving treatment on 31/12/38. The average period of stay was 9 weeks 3 days.

Of the 24 cases discharged, 10 were quiescent, 8 were improved, 1 no improvement, 3 were observation cases found not tuberculous, and 2 died.

15 were fit to return to school, and 6 were placed under Dispensary Supervision, 1 was recommended for treatment at another hospital.

(c) **Out-patients.**

20 children of school age received out-patient treatment at the following hospitals :—

Warrington Infirmary, 1.

Borough General Hospital, 19.

The cases were as follows :—

	Warrington Infirmary.	Borough General Hospital.
Tuberculosis of Cervical Glands	1	12
„ Skin	—	—
„ Bones and Joints —	—	7

The case attending Warrington Infirmary was discharged much improved.

13 of the 19 cases receiving treatment at the Borough General Hospital completed treatment, 11 were discharged much improved, 2 were recommended for in-patient treatment.

6 were still receiving treatment on 31/12/38.

The case that attended the Warrington Infirmary for artificial sunlight treatment made 20 attendances. The 19 cases attending the Borough General Hospital Clinic made 259 attendances. The total out-patient attendances were 279.

6 school children were supplied with surgical appliances or repairs to same.

3 school children were supplied with extra nourishments in the form of Milk and Virol.

X-ray Examinations.

These were carried out at the X-ray Department of the Borough General Hospital by the Tuberculosis Officer in conjunction with Dr. Ross. The number of X-ray examinations during the year was 54. This work has been found to be essential for accurate diagnosis.

8.—INFECTIOUS DISEASES.

The measures taken to prevent the spread of infectious disease have been the same as in previous years. The daily visitation of schools by the nurses has assisted this work considerably.

The re-organisation of the schools in accordance with the Hadow Report undoubtedly brings some medical problems in its train. It is doubtful whether the present elementary school code dealing with exclusions from school on account of infectious disease will not require modification. Junior schools will certainly have a larger concentration of susceptible subjects than the former Three-Department Schools.

The number of cases of **Notifiable** infectious disease occurring among school children during 1938 is shown in the following table, compared with the previous years :—

Year.	Scarlet Fever.	Diph- theria.	Enteric Fever.	Pulmon- ary Tuber- culosis.	Other Tuber- cular Diseases.	Smallpox.
1924	198	26	2	10	23	—
1925	162	33	1	19	37	—
1926	55	48	1	12	12	—
1927	35	48	—	9	22	2
1928	123	40	—	8	23	—
1929	97	96	1	6	17	—
1930	504	103	1	2	21	—
1931	574	50	—	9	22	—
1932	245	47	—	5	16	—
1933	138	74	—	1	14	—
1934	155	333	—	2	7	—
1935	312	323	—	3	12	—
1936	169	232	—	2	17	—
1937	56	71	—	2	9	—
1938	146	84	—	1	15	—

Immunization against Diphtheria.

During the year, 1,667 children—boys 848, girls 819—of school age were immunized at the schools and Clinic.

In every instance the written consent of the parents or guardians is previously obtained and no child is immunized unless consent is given.

At the school, the Head Teacher always assists by getting the written consent of the parents, and they also muster the children when they have to be treated. A nurse is in attendance to assist in the treatment and keep a record of it on a special card.

Tuberculosis.

The actual incidence of tuberculosis amongst the school children of Warrington as known to us on the 31st December, 1938, was as follows :—

	Attending school.		Not attending school.		Total.
	Males.	Females.	Males.	Females.	
Tuberculosis of Lungs	3	—	—	—	3
„ „ Glands	16	13	—	—	29
„ „ Abdomen	7	4	1	—	12
„ „ Bones and Joints	5	4	2	2	13
Other forms of Tuberculosis..	1	—	—	—	1
Total	32	21	3	2	58

The next table shows the number of cases of **Non-Notifiable** infectious disease, although this does not represent the total number of cases occurring in the town among school children, but only those that came to our notice :—

Year.	Whooping cough. cases.	Chicken- pox. cases.	Mumps. cases.	Sore throat. cases.	Measles. cases.	German Measles. cases.
1923	268	416	371	334	540	5
1924	56	272	65	207	559	233
1925	415	592	325	189	1188	2
1926	146	418	1204	99	179	82
1927	135	457	45	210	636	24
1928	72	418	38	208	479	3
1929	463	586	1445	298	71	48
1930	10	312	1262	311	1345	10
1931	288	547	37	318	82	231
1932	212	271	686	333	739	6
1933	116	513	154	234	130	21
1934	350	646	3	268	1043	59
1935	37	348	9	188	261	13
1936	423	586	871	201	872	35
1937	122	419	180	167	44	—
1938	102	358	245	216	723	22

Chickenpox cases numbered 358, and from inquiries made at the homes of school children suffering, it was found that 222 were vaccinated out of the 358 patients.

SCHOOL CLOSURE.

School Closure was not resorted to as a preventive measure for any outbreak of infectious disease in 1938. (Article 45 (b) and 57 of the Code). Closure is resorted to only in very exceptional circumstances, because as soon as the schools are closed one of our most valuable sources of information regarding sickness among the child population is cut off.

Administrative Memorandum No. 51.

During the year 1938, in no case did the attendance fall below 60%, and it was not found necessary to issue certificates under the above memorandum.

In order to minimise as far as possible the risk of conveying infection to school, certain children are referred daily to the A.S.M.O. These cases consist of :—

- convalescents from infectious disease ;
- contacts with infectious disease ;
- children who are suspected of infectious disease ;
- children suffering from sore throats ;

and the numbers dealt with in 1938 are shown in the next table :—

CHILDREN EXAMINED BY THE MEDICAL OFFICER
AS TO FREEDOM FROM INFECTION.

Disease.	Number of Examinations	Cases Detected.	
		Scarlet Fever.	Diphtheria.
SCARLET FEVER (Convalescents examined as to their fitness to return to School.)	99	—	—
DIPHTHERIA Ditto.	102	—	—
CONTACTS with cases of Diph- theria examined previous to being allowed to attend School after case removed to Hospital.	174	—	1
CONTACTS with cases of Scarlet Fever examined previous to being allowed to attend School.	66	—	—
SORE THROATS (examined previous to being allowed to attend School).	52	—	3
RASH	8	1	—
NASAL DISCHARGE	3	—	2
AURAL DISCHARGE	1	—	1
Totals	505	1	7

Deaths from Infectious Diseases and all other causes among children of school age during the past 10 years are given in the following table :—

Cause of Death.	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Scarlet Fever	—	4	7	1	—	2	—	—	—	1
Diphtheria	1	5	3	4	1	24	18	14	4	7
Enteric Fever	—	—	—	—	—	—	—	—	—	—
Measles	—	2	1	1	2	1	—	1	—	—
Whooping Cough	—	—	—	—	1	1	—	—	—	—
Diarrhoea	—	—	—	—	2	—	—	—	—	—
Tuberculosis of Lungs	5	—	2	2	5	2	2	1	2	1
Other Tubercular Diseases.....	1	4	—	2	7	—	—	1	—	2
Influenza	2	—	—	—	2	—	2	—	—	—
Accidents.....	4	8	7	7	4	4	3	3	2	1
All other causes	17	20	18	12	12	19	12	13	11	7
Totals	30	43	38	29	36	53	37	33	19	19

The following table shows the number of visits paid by the Sanitary Inspectors to the homes of school children in investigating and supervising outbreaks of infectious disease :—

To premises where cases of Scarlet Fever, Enteric Fever or Diphtheria occurred	230
Re-visits to ascertain if contacts with Scarlet Fever, Enteric Fever and Diphtheria were free from infection and fit to return to School	251
Re-visits to cases of Scarlet Fever, Diphtheria or Enteric Fever being treated at home	248
Visits to premises where there were cases of Measles and German Measles	745
Re-visits to homes where cases of Measles and German Measles were being treated....	912
Visits to homes of children reported by Education Department as being absent from School, owing to either Whooping Cough, Chickenpox, or Mumps	705
Re-visits to homes of children suffering from either Whooping Cough, Chickenpox, or Mumps	811
Visits to homes of children absent from School with Sore Throat or Suspicious Rash	216
Visits to homes where there were cases of Influenza or Pneumonia	94
Visits to homes of children suffering from Pulmonary and Non-Pulmonary Tuberculosis	250
Total	4,462

9.—PROVISION OF MEALS.

Voluntary schemes for the supply of milk to school children have been in operation in our schools for the past ten years, extending from year to year.

Once again our best thanks are due to all those teachers who so ably initiated and conducted these schemes.

As it is absolutely essential that any scheme for the provision of milk to growing children should ensure that the supply is free from the tubercle bacillus, we have made it a condition that all supplies should be either "Pasteurised" or "Tuberculin Tested." At the moment only pasteurised milk is being supplied.

In a few cases dried malted milk is used in addition to cow's milk.

The cost is $\frac{1}{2}$ d per $\frac{1}{3}$ rd. of a pint.

A scheme is in operation whereby the Local Authority supplies the milk free to necessitous cases.

In accordance with the policy laid down by the Board, selection of these cases has been based on medical grounds.

At the Routine Inspections, all children whose nutrition is either slightly sub-normal or bad are recommended by the Assistant School Medical Officer to have milk in school. In addition, children whose nutrition is noted as normal may be suffering from some defect or disease, and the Medical Officer has recommended certain of them as being in need of milk. Reports have been received from the Medical Officer of Health, Head Teachers, School Nurses, School Attendance Officers and parents, of children who are in need of milk meals, and arrangements have been made for their early examination by the Assistant School Medical Officer at the School Clinic.

From the Routine Inspections 755 children, of whom 454 had been already dealt with, have been noted by the Assistant School Medical Officer as being in need of milk, and at special inspections at schools and clinic 330 children have been noted.

In all recommended cases visits have been made by the School Attendance Officers (except where parents have themselves attended at the Office) to inform the parents of the Assistant School Medical Officer's recommendations, and to enquire whether it is desired that application for milk free of charge is to be made, or whether the parent will arrange with the Head Teacher to send payment for it.

The following tables show the number of children dealt with under the scheme, which embraces every school in the Borough:—

RETURN IN REGARD TO THE PROVISION OF MILK FOR CHILDREN
ATTENDING PUBLIC ELEMENTARY SCHOOLS.

Month.	No. of Bottles of Milk Sup- plied Free.	Cost.			Number of Milk Meals.			Number of Children.			Number of Children Recorded for the first Time.		
		£	s.	d.	Free.	For Payment.	Total.	Free.	For Payment.	Total.	Free.	For Payment.	Total.
January	31689	66	0	4½	15882	13078	28960	1085	1044	2129	40	65	105
February	40310	83	19	7	20207	16889	37096	1137	1089	2226	68	29	97
March	47913	99	16	4½	24197	20060	44257	1150	1110	2260	36	54	90
April	29820	62	2	6	14926	12059	26985	1148	1084	2232	23	14	37
May	42655	88	17	3½	21506	18156	39662	1129	1107	2236	38	55	93
June	32892	68	10	6	16708	13791	30499	1122	1076	2198	38	23	61
July	31316	65	4	10	15747	12393	28140	1134	1091	2225	26	53	79
August	15870	33	1	3	7943	5950	13893	1078	971	2049	12	28	40
September	45668	95	2	10	22854	17709	40563	1130	1025	2155	56	33	89
October	42795	89	3	1½	21415	16531	37946	1157	1039	2196	36	41	77
November	38211	79	12	1½	19117	14983	34100	1148	1031	2179	43	47	90
December	34482	71	16	9	17455	13890	31345	1142	1026	2168	42	23	65
Totals	433621	903	7	6½	217957	175489	393446				458	465	923

Return in regard to the Provision of Milk for normal children (*i.e.*, those outside the scheme for under-nourished children).

Month.	Number of Milk Meals.	Number of Children.	No. of children Recorded for the first time.
January	60492	4576	194
February	74307	4662	89
March	87556	4666	107
April	54211	4709	186
May	80681	4819	90
June....	62360	4638	71
July	51208	4374	49
August	28567	4317	269
September	83781	4633	124
October	79347	4665	97
November	68340	4570	185
December	62019	4503	67
Totals	792869	—	1528

10.—OPEN-AIR EDUCATION.

There are now four schools of the semi-open-air type, which are particularly well ventilated and lighted and capable of being thrown open on two sides. They are well provided with playing space and their favourable environment should be of assistance in promoting the health of the scholars.

In the older schools when circumstances permit, playground classes are organised as there are no class rooms of an open-air type in them.

There is no special day or residential open-air school available for Warrington children.

11.—PHYSICAL TRAINING.

As far as possible, every child undergoes physical training for a period of twenty minutes each day. The syllabus is based on the Syllabus of Physical Training for Schools issued by the Board of Education in 1919 and usually each teacher is responsible for his or her own class. The Town Hall, Parks and Baths Committee have given permission for the use of Bank Park for organised games during school hours.

In addition to the physical education in school hours, the teachers have organised competitions in Football (Association and Rugby) Netball, Rounders, Hockey and Swimming, which take place outside of school hours, and in which all the schools take part.

Swimming Instruction.

All children attend at the Baths for swimming instruction in the summer, following their attaining the age of eleven years. The course takes two seasons to complete.

Following the recommendation of the Board of Education embodied in Circular 1445 an Organiser of Physical Training was appointed during the year and commenced duty on the 1st September, 1937.

School Baths have been installed in three of the schools in the town (Bolton Council, Evelyn Street Council and Oakwood Avenue) and full use has been made by the children of the facilities provided.

A special system for the complete purification of the water has been installed in the Public Baths at Legh Street, and parents need have no fear that their children run any risk of contagion there.

In the School Report for 1933, some hints were given for the children using these baths, together with a list of rules that should be observed.

12.—CO-OPERATION OF PRIVATE PRACTITIONERS, PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

(a) General Practitioners.

We are greatly indebted to the private doctors in the town for the cordial manner in which they co-operate with us. Both in the matter of granting certificates for non-attendance at school and in assisting in the following up and treatment of defects discovered at routine inspections, the private practitioners do invaluable work and are always ready and willing to consult the School Medical Department.

We refer all cases whose circumstances warrant it to the family doctor for treatment and the family doctor in return does not hesitate to avail himself promptly of any facilities for treatment offered by the Local Authority that he considers his patient requires.

(b) Parents.

In 1,519 instances (46.4%) out of 3,267 examinations at routine medical inspections, one or both of the parents were present.

These attendances, which may be looked on as satisfactory, vary greatly according to sex and age of the child being examined. On the average, more than 75% were present for the entrant group, some 48% for the intermediate group, and 19% for the leaver group.

There was 1 objection to Routine Medical Inspection.

In the majority of cases the parents act at once on the advice offered, and co-operate willingly in obtaining adequate attention for their children.

Committee Cases and Prosecutions.

Only as a last resort are parents summoned to appear before the School Medical Service Sub-Committee. During 1938 this action was not found necessary.

The steps taken in dealing with uncleanness are given on page 32.

(c) Teachers.

The success of the work of the School Medical Service is due in large measure to the help given by the Teachers, who co-operate both willingly and generously at medical inspections, and in the treatment and after-care of the children.

This is more than ever evident at the present time when so much treatment is being carried out in the schools by the Nurses. The ready assistance of the Teachers has been largely responsible for the success of this work.

Once more our best thanks are due to the teachers, who are assisting so much in the improvement of the health of their pupils by the distribution of a daily supply of milk.

(d) School Attendance Officers.

The School Attendance Officers have again rendered every assistance possible to our Department.

13.—BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

The following table shows the number of exceptional children in the area together with the incidence of defective children per 1,000 of the school population (see tables in the Appendix page 58).

				Number of Children	Incidence per 1,000
Multiple Defect	....	....	....	1	.09
Blind—Totally	....	....	....	4	.36
Partially-sighted	....	....	....	18	1.63
Deaf—Totally	....	....	....	5	.45
Partially	....	....	....	—	—
Mentally Defective (feeble-minded)				23	2.08
Epileptic (Severe)	....	....	....	11	.99

	Number of Children	Incidence per 1,000
Physically Defective.		
Pulmonary Tuberculosis	3	.27
Non-pulmonary Tuberculosis	55	4.98
Delicate Children	29	2.63
Crippled Children.... ..	21	1.90
Heart Disease	26	2.35
Total—Physically Defective	134	12.15
Grand Total	196	17.68

(a) In the 1933 Report a review was given (and need not be repeated here) of the methods adopted for ascertaining and dealing with children who are defective within the meaning of Part V of the Education Act, 1921.

The numbers of exceptional children in 1938 were as follows :—

(i) **Blind.**

	Boys	Girls	Total
At certified schools for the Blind.... ..	2	2	4
Partially-sighted (At certified schools for the partially-sighted)	9	8	17
Partially-sighted (At Public Elementary Schools)	—	1	1
	11	11	22

(ii) **Deaf.**

At certified schools for the Deaf	4	1	5
---	---	---	---

(iii) **Physically Defective.**

Not Attending School :—

(a) Crippled Children

Spastic paralysis	1	—	1
	1	—	1

(b) Children with heart disease	1	2	3
---	---	---	---

(c) Delicate children—

Corneal Ulcers	1	—	1
? Tuberculosis	—	1	1
	1	1	2

In Institutions :—

Delicate Children

Chorea	—	1	1
Osteomyelitis	1	—	1
	1	1	2

Attending School :—

(a) Crippled Children					Boys	Girls	Total
Drop Foot	....	....	....	....	1	—	1
Infantile Paralysis	....	....	....	....	9	3	12
Spastic Paralysis	....	....	....	....	3	—	3
Diseased Hip and Fracture Left Femur	....	....	....	....	1	—	1
Perthes Disease, Left Hip	....	....	....	....	1	—	1
Hip Disease and Dislocation	....	....	....	....	1	—	1
Hip Disease	....	....	....	....	1	—	1
					17	3	20
(b) Children with Heart Disease....					11	12	23
(c) Delicate Children							
Rheumatic Endocarditis	....	....	....	....	2	2	4
Rickets and Debility	....	....	....	....	—	1	1
Curvature Spine	....	....	....	....	—	2	2
Rickets and Bronchitis	....	....	....	....	1	—	1
Chorea and Endocarditis	....	....	....	....	—	1	1
Debility	....	....	....	....	—	3	3
Chorea	....	....	....	....	1	1	2
Incontinence and Bronchitis	....	....	....	....	—	1	1
Cardiac Disease	....	....	....	....	—	1	1
Rheumatism	....	....	....	....	1	—	1
Rheumatic Carditis	....	....	....	....	—	1	1
Cases under observation of T.B. Officer	....	....	....	....	4	3	7
					9	16	25

The Board of Education has directed that children should not be regarded as suitable for admission to an open-air school unless the Medical Officer is prepared to certify that they are incapable, by reason of physical defect, of receiving proper benefit from instruction in the ordinary Public Elementary Schools.

For cases of Tuberculosis attending or not attending School, see page 35.

(iv) Mentally Defective.

Feeble-minded :					Boys.	Girls.	Total.
At Public Elementary Schools	.....				6	4	10
Not at school	.....	.....	.....	.....	7	6	13
					13	10	23
Notified to Local Authority: Imbeciles					1	2	3
Idiots	....	....	....	....	1	—	1
Mentally Defective and Blind or Deaf	....	....	....	....	1	—	1
					3	2	5

(v) Epileptic.

		Boys.	Girls.	Total.
At certified special schools....	....	1	—	1
At Public Elementary Schools	....	—	—	—
Not at school	.... ....	4	6	10
		<hr/>	<hr/>	<hr/>
		5	6	11
		<hr/>	<hr/>	<hr/>

(b) Arrangements for supervision of mentally defective children not in special schools.

Feeble-minded children who can do so attend at the elementary schools and are inspected by the A.S.M.O. every time he visits the school, i.e., twice a year. Those children who cannot attend an elementary school because of their troublesome behaviour are re-examined periodically at the school Clinic. All cases notified to the Local Authority (ineducables) are also reported to the West Lancashire Association for Mental Welfare, and feeble-minded children who attain 14 years of age are notified to this association also. A further notification is also sent of all M.D. cases on their attaining 16 years of age.

The West Lancashire Association conducts a mental defectives' "occupation centre" in the town, and the School Medical Service co-operates with them in recommending suitable cases and in advising parents to take advantage of the facilities offered.

(c) Special Schools.

There are no special schools in this Borough.

14.—HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

At the age of 16 years blind children are transferred to institutions for training. Before this is done, the local Society for the Blind is consulted as to the occupation which is likely to be most suitable for the student, from the point of view of employment in the future.

The local Society for the Blind reports blind adults who are in need of training and arrangements are made for their admission to a suitable institution. Close co-operation is maintained with the Society for the Blind during the period of the student's training.

During 1938 there were 7 persons in training in institutions for the Blind.

There are no Deaf, Epileptic or other Defective children receiving higher education.

There is co-operation with the local Deaf and Dumb Society and the Northern Counties' Association for the Deaf, and the services of the Education Committee's Choice of Employment department are used in finding suitable employment for deaf children when they leave school.

The Local Authority does not maintain any training courses of its own.

15.—NURSERY SCHOOLS.

There are no Nursery Schools in the area.

Under our Maternity and Child Welfare Scheme, we have our Health Visitors constantly visiting the homes of children up to five years of age, we have our Consultation Centres at which parents can always obtain medical advice and we have instituted a system which offers a Routine Medical Inspection to all children at their third birthday. Unfortunately, only the intelligent type of mother takes advantage of the facilities provided, and year after year we find defects amongst the entrant class of school children (*i.e.*, those of 5 years of age) that might have been prevented, or at any rate remedied, at an earlier age, if the child had been under close medical supervision.

Whilst admitting that the ideal place for the child of tender years is with the mother in its own home, there are many small children who cannot get the personal attention they require because the mother has to go out to work, or the food is unsuitable or insufficient, or the home is squalid. These are the very ones who do not attend our Centres, and admission of them to the Public Elementary School before the age of five would be of the utmost advantage, for it brings them within the scope of the School Medical Service. There are two main ways of accomplishing this—firstly by providing a special nursery school or nursery classes for children aged from 2 to 5 years, or, secondly, by lowering the age of the entrance to the ordinary classes.

16.—SECONDARY SCHOOL.

There is one Secondary School for boys and girls (Municipal Secondary School) provided by the Authority, and a Secondary School for boys (Boteler Grammar School) which previously was aided by the Authority, has been, since the 26th May, 1933, provided by the Authority.

The arrangements for medical inspection and treatment of the children attending the Secondary School were given in detail in the Report for 1931.

The results disclosed are given in the tables in the Appendix "Defects" in Table IIa, page 56 and the treatment of the defects in Table IV, group II, page 62.

Secondary School and Boteler Grammar School.

Number of children examined at the Routine Medical inspection:—

Secondary School—

Boys	175
Girls	158

Boteler Grammar School—

Boys	201
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534

Number of Special Inspections 18

NUTRITION.

		Above normal.	Normal.	Below normal.	Markedly defective.
Secondary School—					
Boys	....	20	139	14	2
Girls	....	38	104	15	1
Boteler Grammar School—					
Boys	....	24	164	12	1
		<hr/> 82	<hr/> 407	<hr/> 41	<hr/> 4
		15.35%	76.21%	7.67%	.74%

In comparison with the children in the Elementary Schools, as might be expected, the standard of nutrition of the Secondary Schools is higher.

VISION.

		6/6	6/9	6/12	Wearing glass im- glasses.	No glass im- proves.	Requiring treat- ment.
Secondary School—							
Boys	....	136	10	—	23	—	6
Girls	....	119	12	1	24	—	2
Boteler Grammar School—							
Boys	....	140	17	3	29	1	11
		<hr/> 395	<hr/> 39	<hr/> 4	<hr/> 76	<hr/> 1	<hr/> 19
		73.97%	7.30%	.74%	14.23%	.18%	3.55%

17.—PARENTS' PAYMENTS.

(a) In the report for 1933, full details were given of the cost of the various forms of treatment provided for the children and the scale of charges (if any) made to parents.

(b) Arrangements for recovering the cost of treatment from parents of pupils attending the Secondary School are exactly the same as for the public elementary schools.

(c) Parents' contributions towards the cost of maintenance in special schools (Blind, Deaf, etc.) are assessed by the School Attendance Committee according to the income of the family.

18.—HEALTH EDUCATION.

A large amount of health teaching goes on daily in our schools and the handbook of the Board of Education on "Suggestions on Health Education" is in general use.

The Head Teachers found the leaflets and publications of the Health and Cleanliness Council of very great service to them in their efforts to inculcate a hygienic conscience.

19.—SPECIAL INQUIRIES.

There have been no special inquiries during the year under review.

20.—MISCELLANEOUS.

(a) Examination of Bursars, Student and Pupil Teachers.

During the year two candidates for Student Teacherships were medically examined and found fit by the Assistant School Medical Officer.

(b) Number of Children Examined Before Summer Camp.

Summer camp examinations	500
--------------------------	------	------	-----

(c) Employment of Children and Young Persons.

The Local Education Authority set up in 1925 a Special Juvenile Employment Committee to exercise the powers under Section 107 of the Education Act, 1921, and Section 6 (1) of the Unemployment Act, 1923.

The main facts are transferred from the child's school medical schedule card to the Juvenile Employment Bureau card. Further, a special full report is submitted in the case of every physically defective or exceptional child applying for employment.

Ever since the Juvenile Employment Bureau was first instituted, there has been close co-operation between it and the School Medical Staff.

Before the issue of Administrative Memorandum 137 (16th September, 1935), the Juvenile Employment Officer was informed of any unsuitable occupation for individual children and now, when necessary, the following form duly completed is sent in :—

This child is unsuitable for employment :—

- (a) in severe manual work,
- (b) in sedentary occupation,
- (c) necessitating exposure to bad weather,
- (d) in a dusty atmosphere,
- (e) near moving machinery,
- (f) involving prolonged standing,
- (g) causing eye strain,
- (h) requiring acute distant vision,
- (i) requiring acute hearing.

The 1934 Byelaws governing the Employment of children under 14 years of age were set out in the School Report for that year.

The following figures summarise the work for the year 1938 :—

Employment of Children Bye-laws.

Number of Employment Cards in use 1st January	....	....	187
Number of Employment Cards issued during the year	....	....	199
Number of Employment Cards withdrawn during the year	....	....	207
Number of Employment Cards in use 31st December	....	....	179
Number of Cases of Contravention of Bye-Laws	....	....	42
Number of Cases warned verbally	....	....	27
Number of Cases warned by letter	....	....	11
Appeared before the S.A. Committee	....	....	4
Prosecutions	....	....	2
Number of Children examined by A.S.M.O.	....	....	172
Number of re-examinations of above (in school)	....	....	179
Number of Cases found, on examination, to be unfit for employment	....	....	3★

*Includes 1 child subsequently examined and certified fit.

Summary of Occupations.

	Boys.	Girls.
Delivery of Newspapers	122	—
Delivery of Milk	28	2
Drapers' and Outfitters' Errands	4	—
Butchers' Errands	6	—
Fruiterers' and Greengrocers' Errands	3	—
Grocers' Errands	5	—
Other Tradesmen's Errands	9	—
	<hr/> 177	<hr/> 2

CHILDREN AND YOUNG PERSONS ACT, 1933.

(Street Trading).

Number of Cases of contravention of the Act	....	....	16
Number of Cases warned verbally	....	....	15
Number of Cases warned by letter	....	....	—
Appeared before the S.A. Committee	....	....	1
Prosecutions	....	....	—

**STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED
DURING THE YEAR ENDED 31st DECEMBER, 1938, BY THE
LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL
DEFICIENCY AUTHORITY.**

DIAGNOSIS.	BOYS.	GIRLS.
1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots	1	—
(b) Imbeciles	1	2
(c) Others	—	—
(ii) Children unable to be instructed in a Special School without detriment to the interests of other children :		
(a) Moral defectives	—	—
(b) Others	—	—
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16	—	—
3. Feeble-minded children notified under Article 3, <i>i.e.</i> , "special circumstances" cases	—	—
<i>Note.</i> —No child should be notified under Article 3 until the Board have issued a formal certificate (Form 308M) to the Authority		
4. Children who in addition to being mentally defective were blind or deaf	1	—
<i>Note.</i> —No blind or deaf child should be notified without reference to the Board—see Article 2, proviso (ii).		
GRAND TOTAL	3	2

TABLE I.—RETURN OF MEDICAL INSPECTIONS, 1st JANUARY, 1938, TO 31st DECEMBER, 1938.

FORM 8aM.

A.—Routine Medical Inspections.

Number of Inspections in the Prescribed Groups:—

Entrants....	Age 4		Age 5		Age 6		Age 7		Age 8		Totals
	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	
	—	1	169	161	267	259	43	46	12	18	
	Age 9										
	B.		G.								
	2		—								978

Second Age Group ....	....	Age 8		Age 9		Age 10		Total
		Boys	Girls	Boys	Girls	Boys	Girls	
		530	527	48	38	4	2	
<hr/>								
Third Age Group ....	....	....	....	Age 12		Age 13		Total
				Boys	Girls	Boys	Girls	
				538	519	36	27	
Total								3247

Number of other Routine Inspections :—

	Boys.	Girls.	Total.
Partially Sighted Class	11	9	20

GRAND TOTAL 3267

B.—Other Inspections.

Special Inspections	....	....	....	....	2537
Re-inspections	....	....	....	....	1271
Total	....	....	....	....	3808

C.—Children found to require Treatment.

Prescribed Groups :—

	Defective Vision.	Others.	Total.
Entrants	—	44	44
Second Age Group	62	32	94
Third Age Group	63	30	93
Total	125	106	231
Other Routine Inspections	—	—	—
Grand Total	125	106	231

SECONDARY SCHOOLS.

A.—Routine Medical Inspections.

Boys.	Girls.	Total.
376	158	534

B.—Other Inspections.

Special Inspections	....	....	18
Re-Inspections	....	....	49
Total	....	....	67

JUNIOR INSTRUCTION CENTRE.

A.—Routine Medical Inspections.

Boys.	Girls.	Total.
220	218	438

B.—Other Inspections.

Special Inspections	....	....	2
Re-inspections	....	....	2
Total	....	....	4

TABLE II. (A.)

[illegible]

TABLE II. (A.)—*continued.*

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Defective Speech .....	....	4	....	1	....	....	....	....	....	....	....	....
Heart and Circulation—												
Heart Disease												
Organic .....	....	6	....	1	....	2	....	....	....	....	....	....
Functional .....	....	18	....	2	....	1	....	....	....	....	....	....
Anæmia .....	....	11	....	....	....	....	....	....	....	....	....	....
Lungs—												
Bronchitis .....	....	5	....	....	....	....	....	....	....	....	....	....
Other Non-Tubercu- lous Diseases .....	....	....	....	....	....	1	....	....	....	....	....	....
Tuberculosis—												
Pulmonary :												
Definite .....	....	....	....	....	....	....	....	....	....	....	....	....
Suspected	2	....	....	....	....	....	....	....	....	....	....	....
Non-Pulmonary :												
Glands .....	....	5	1	....	....	....	....	....	....	....	....	....
Spine .....	....	2	....	....	....	....	....	....	....	....	....	....
Hip .....	....	2	....	....	....	....	....	....	....	....	....	....
Other Bones and Joints .....	....	....	....	....	....	....	....	....	....	....	....	....
Skin .....	....	....	....	....	....	....	....	....	....	....	....	....
Other Forms .....	....	4	....	....	....	....	....	....	....	....	....	....
Nervous System—												
Epilepsy .....	....	2	....	....	....	....	....	....	....	....	....	....
Chorea .....	....	15	....	3	....	....	....	....	....	....	....	....
Other Conditions .....	....	2	....	1	....	....	....	....	....	....	....	....
Deformities—												
Rickets .....	....	7	....	....	....	....	....	....	....	....	....	....
Spinal Curvature	1	5	2	2	....	....	....	....	1	....	....	....
Other Forms	4	16	15	1	....	2	....	....	....	1	....	....
Other Defects & Diseases (Excluding Defects of Nutrition, Uncleanliness and Dental Diseases)	2	28	9	13	2	1	....	....	1	3	....	....
Total	234	351	562	74	23	9	16	2	52	7	1	....

B.—Classification of the Nutrition of Children inspected during the year in the
Routine Age-Groups.

ROUTINE AGE-GROUP INSPECTIONS.

Age-Groups.	No. of children inspected	A. (Excellent)		B. (Normal)		C. (Slightly sub-normal)		D. (Bad)	
		No.	%	No.	%	No.	%	No.	%
Orphan Asylums	978	162	16.56	774	79.14	37	3.78	5	.51
Second Age-Group	1149	142	12.35	848	73.80	142	12.35	17	1.47
Third Age-Group	1120	140	12.50	782	69.82	172	15.35	26	2.32
Other Routine Inspections—									
Partially Sighted Class	20	1	5.00	15	75.00	3	15.00	1	5.00
Secondary Schools	534	82	15.35	407	76.21	41	7.67	4	.74
Ir. Instruction Centre	438	84	19.17	288	65.75	60	13.69	6	1.36
Total	4239	611	14.41	3114	73.46	455	10.73	59	1.39

TABLE III.—RETURN OF ALL EXCEPTIONAL CHILDREN
IN THE AREA.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions	At no School or Institution.	Total.
4	—	—	—	4

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	17	1	—	—	18

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions	At no School or Institution.	Total.
5	—	—	—	5

PARTIALLY DEAF CHILDREN—NIL.

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions	At no School or Institution.	Total.
—	10	—	*13	23

* Includes 9 children between fourteen and sixteen years of age.

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	—	—	*10	11

* Includes 3 children between fourteen and sixteen years of age.

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY
TUBERCULOSIS.

(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	3	—	—	3

II.—CHILDREN SUFFERING FROM NON-PULMONARY
TUBERCULOSIS.

(This category should include tuberculosis of all sites other than those shown in (I) above.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	50	2	3	55

B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	25	2	2	29

C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	20	—	1	21

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	23	—	3	26

MULTIPLE DEFECTS.

Epilepsy and Spastic Gait	....	—
At other Institutions	....	1

TABLE IV.—RETURN OF DEFECTS TREATED DURING THE
YEAR ENDED 31st DECEMBER, 1938.

TREATMENT TABLES.

GROUP I.—*Minor Ailments*
(excluding Uncleanliness, for which see Table VI.) :—

Defect or Disease. (1)	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
<i>Elementary Schools—</i>			
<i>Skin—</i>			
Ringworm—Scalp.			
(i) X-Ray Treatment	3	—	3
(ii) Other „	8	—	8
Ringworm—Body	10	—	10
Scabies	28	96	124
Impetigo	165	16	181
Other Skin Diseases	4	7	11
<i>Minor Eye Defects—</i>			
(External and other, but excluding cases falling in Group II.)	58	12	70
<i>Minor Ear Defects</i>	9	3	12
<i>Miscellaneous—</i>			
(e.g., minor injuries, bruises, sores, chilblains, etc.)	56	45	101
Total	341	179	520

TABLE IV.—Continued.

GROUP II.—*Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).*

Defect or Disease (1)	Number of Defects dealt with.			
	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme. (3)	Other- wise. (4)	Total. (5)
<i>Elementary Schools—</i>				
Errors of Refraction (in- cluding Squint)	288	9	28	325
Other Defect or Disease of the Eyes (excluding those in Group I.)	—	—	—	—
Total	288	9	28	325
<i>Secondary School—</i>				
Errors of refraction (in- cluding Squint)	11	3	10	24
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	—	—	—	—
Total	11	3	10	24
<i>Junior Instruction Centre—</i>				
Errors of refraction (in- cluding Squint)	2	1	9	12
Other Defects or Disease of the Eyes (excluding those recorded in Group I.)	—	—	—	—
Total	2	1	9	12

Total number of Children for whom Spectacles were prescribed :—

	Elementary Schools.	Secondary School.	Junior Instruction Centre.
(a) Under the Authority's Scheme	*183	8	—
(b) Otherwise	29	6	3
<i>Total number of Children who obtained or Received Spectacles :—</i>			
(a) Under the Authority's Scheme	*184	8	—
(b) Otherwise	29	6	3

*Due to "carry over."

TABLE IV.—Continued.

GROUP III.—*Treatment of Defects of Nose and Throat :—*

NUMBER OF DEFECTS.				
Received Operative Treatment.			Received other forms of Treatment	Total number treated
Under the Authority's Scheme in Clinic or Hospital	By Private Practitioner or Hospital, apart from the Authority's Scheme	Total		
(1)	(2)	(3)	(4)	(5)
<i>Elementary Schools—</i>				
Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Others	
4	—	200	14	
		2		220
			63	283
<i>Secondary School—</i>				
—	—	3	—	
		—		3
			1	4

GROUP IV.—*Orthopaedic and Postural Defects.*

	Under the Authority's Scheme (1)			Otherwise. (2)			Total number treated.
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-Residential treatment at an orthopaedic clinic. (iii)	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
Number of children treated	—	—	108	—	—	17	125

TABLE V.—DENTAL INSPECTION AND TREATMENT.

ELEMENTARY SCHOOLS.

(1) Number of Children who were :—

(a) Inspected by the Dentist :—Aged :

Routine Age Groups	4	7	}	Total	10132
	5	358			
	6	917			
	7 ...	1095			
	8	1146			
	9	1128			
	10	1067			
	11	1431			
	12	1225			
	13	1248			
	14	508			
	15 —	2			

Specials 1353

Grand Total 11485

TABLE V.—Continued.

(b) Found to require treatment	....	....	....	....	....	9214
(c) Actually treated	....	....	....	....	....	4740
(2) Half-days devoted to	{	Inspection	....	116	}	
		Treatment	....	818		
					Total	934
(3) Attendances made by children for treatment	....	....	....	....	....	5821
(4) Fillings	{	Permanent teeth	1478	}		
		Temporary teeth	280		Total	1758
(5) Extractions	{	Permanent teeth	1667	}		
		Temporary teeth	5863		Total	7530
(6) Administrations of general anæsthetics for extractions	....	....	....	....	....	3690
(7) Other operations	{	Permanent teeth	238	}		
		Temporary teeth	7		....	....
						<u>245</u>

SECONDARY SCHOOL.

(1) Number of Children who were :—

(a) Inspected by the Dentist :—

					Aged :				
					{	10	....	12	
						11	....	58	
						12	....	102	
						13	....	100	
Routine Age Groups	....				{	14	....	105	
						15	....	104	
						16	....	54	
						17	....	17	
						18	....	4	
					}				
									Total
									556
Specials	....	....	....	....	....	....	....	....	2
									<u>Grand Total</u>
									<u>558</u>

(b) Found to require treatment 392

(c) Actually treated 146

(2) Half-days devoted to	{	Inspection	....	6	}		
		Treatment	....	10		Total	16
(3) Attendances made by children for treatment	....	....	....	....	....	....	290
(4) Fillings	{	Permanent teeth	195	}			
		Temporary teeth	—		Total	195	
(5) Extractions	{	Permanent teeth	81	}			
		Temporary teeth	24		Total	105	
(6) Administrations of general anæsthetics for extractions	....	....	....	....	....	....	65
(7) Other operations	{	Permanent teeth	55	}			
		Temporary teeth	—		....	....	<u>55</u>

TABLE V.—Continued.

JUNIOR INSTRUCTION CENTRE.

(1) Number of Children who were :—

(a) Inspected by the Dentist :—

		Aged :			
Routine Age Groups	....	{	14	94	Total 377
			15	65	
			16	87	
			17	103	
			18	28	
Specials	....				9
Grand Total					<u>386</u>

(b) Found to require treatment 296

(c) Actually treated 35

(2) Attendances made by children for treatment 37

(3) Half-days devoted to { Inspection 6 }
 { Treatment 4 } Total 10

(4) Fillings { Permanent teeth 9 }
 { Temporary teeth — } Total 9

(5) Extractions { Permanent teeth 23 }
 { Temporary teeth 4 } Total 27

(6) Administrations of general anæsthetics for extractions 18

(7) Other operations { Permanent teeth 8 }
 { Temporary teeth — } Total 8

TABLE VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i)	Average number of visits per school made during the year by the School Nurses	....	....	....	....	8.3
(ii)	Total number of examinations of children in the Schools by School Nurses	....	....	....	....	29,635
(iii)	Number of individual children found unclean	....	....	....	....	2,543



